

STATE OF WEST VIRGINIA

DEPARTMENT OF ENVIRONMENTAL PROTECTION

Application for Land Application of Domestic Septage and/or Sewage Sludge

(See Instructions for Specific Item Information)

TYPE OF APPLICATION (Check One)	<input type="checkbox"/> New Permit Registration <input type="checkbox"/> Registration Renewal <input type="checkbox"/> Modification of Existing Registration Existing Registration No. WVSG10 _____ (If applicable)		
NAME OF FACILITY			
CONTACT PERSON	Name & Title _____ Phone _____ E-mail Address _____		
MAILING ADDRESS	Street or Box Number _____ City _____ State ____ Zip Code _____		
OFFICE LOCATION	Street or Box Number _____ County _____ City _____ State ____ Zip Code _____		
OWNER INFORMATION	Name of Owner _____ Street or Box Number _____ City _____ State ____ Zip Code _____ E-mail Address _____		
BPH PERMITS, LICENSES AND APPLICATIONS (Include copy of your BPH Permit)			
Issuing Agency	Type of Permit	Permit Number	Effective/Expiration Date

METHOD OF DISPOSAL (Check All That Apply)	<input type="checkbox"/> Land Application <input type="checkbox"/> Incinerator <input type="checkbox"/> Landfill(s) – Specify _____ _____ _____
DESCRIPTION OF STORAGE METHOD(S)	
DESCRIPTION OF VECTOR ATTRACTION REDUCTION METHOD(S)	
Primary Method	
Secondary Method(s)	
DESCRIPTION OF PATHOGEN REDUCTION METHOD(S)	
Primary Method	
Secondary Method(s)	
CERTIFICATION	
<div style="border: 1px solid black; padding: 5px;"> <p>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based upon my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</p> </div>	
Name & Official Title	
Signature _____ Date _____	

We will process your personal information (email address, mailing address and/or telephone number) in accordance with the State of West Virginia's Privacy Policy for appropriate and customary business purposes. Your personal information may be disclosed to other State agencies or third parties in the normal course of business or as needed to comply with statutory or regulatory requirements, including Freedom of Information Act requests. The Division of Water and Waste Management will appropriately secure your personal information.

If you have any questions about our use of your personal information, please contact the DEP's Chief Privacy officer at depprivacyofficer@wv.gov.

ATTACHMENT A

SOURCE OF SEWAGE SLUDGE

Complete a separate page for each facility contributing septage and/or sludge to the permitted facility.

FACILITY INFORMATION	
Facility Name	
Mailing Address	
Specific Location (Street or Route No. Including County)	
WV/NPDES Number	

QUANTITY	
Amount of Domestic Septage &/or Sludge Pumped (Gallons per year)	
Design Flow of Wastewater Plant (Package Plants Only)	

QUALITY			
Enter results of last three sludge analyses (mg/kg)			
Sample Date			
Arsenic			
Cadmium			
Chromium			
Copper			
Lead			
Mercury			
Molybdenum			
Nickel			
Selenium			
Zinc			
Organic-Nitrogen			
Ammonia-Nitrogen			
Potassium			
Phosphorus			
Calcium			
Magnesium			
Percent Solids			
Fecal Coliform			
pH			

ATTACHMENT B

LAND APPLICATION SITE INFORMATION

Complete one page per land application site.

Provide as attachments: Topographical map; farm map with field(s) clearly marked; and a signed copy of the landowner agreement.

GENERAL INFORMATION							
Site or Farm Name							
Mailing Address							
Specific Location (Street or Route No. Including County)							
Phone Number							
CATEGORY (check one) <input type="checkbox"/> Farm <input type="checkbox"/> Mine <input type="checkbox"/> Other – specify _____							
SITE INFORMATION (Attach nutrient analysis (N-P-K) for each field)							
Field ID	Acres	pH	Crop Type	Soil Type	Prev. App. *	Latitude	Longitude
* - If sludge or fertilizer was previously applied to the site, list the amount in gallons							

BACKGROUND (SOIL) METALS		Sample Date:	
Arsenic		Mercury	
Cadmium		Molybdenum	
Chromium		Nickel	
Copper		Selenium	
Lead		Zinc	

Date Site Approved by DEP Inspector _____ (Attach copy of approval)
Describe how soil pH will be maintained above 6.2 s.u. for 5 years after application ends:
Describe method of transporting septage &/or sludge to land application site:
Describe method of spreading septage &/or sludge:
Describe storage method(s):